

3748

Please type a plus sign inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/616,303
		Filing Date	July 14, 2000
		First Named Inventor	Edward L. Sinofsky, Ph.D.
		Group Art Unit	3748
		Examiner Name	C. Chang
Total Number of Pages in This Submission	1	Attorney Docket Number	101327-0146

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment and Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Return Postcard
Remarks		RECEIVED FEB 26 2003 TECHNOLOGY CENTER R3700

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

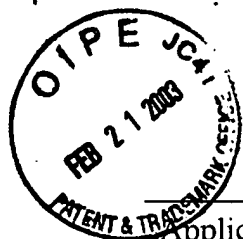
Firm or Individual Name	NUTTER MCCLENNEN & FISH LLP Lisa J. Michaud Reg. No.: 44,238
Signature	
Date	February 14, 2003

Transmittal

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Box Non-Fee Amendment, Commissioner for Patents, Washington, DC 20231, on the date shown below.

Dated: February 14, 2003

Signature: (Lisa J. Michaud)



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#9/amdt
2/27/03
lu

Applicant(s) : Edward L. Sinofsky et al.
Application No. : 09/616,303
Filed : July 14, 2000
Entitled : **CATHETER ANCHORING
BALLOON STRUCTURE WITH
IRRIGATION**
Docket No. : 101327-146

Group Art Unit: 3748
Examiner: C. Chang

Certificate of Mailing (37 C.F.R. 1.8(a))

I hereby certify that this correspondence is being deposited with the United States Postal Service Post Office as first class mail in an envelope addressed to: **Box Non-Fee Amendment**, Commissioner for Patents, Washington, D.C. 20231 on the date set forth below.

February 14, 2003

By:

Date of Signature and Mail Deposit

Lisa J. Michaud, Reg. No: 44,238
Attorney for Applicant(s)

Box Non-Fee Amendment
Commissioner for Patents
Washington, DC 20231

RECEIVED

FEB 26 2003

TECHNOLOGY CENTER R3700

AMENDMENT AND RESPONSE

Dear Sir:

In response to the Office Action dated November 25, 2002, please amend the above-referenced patent application as follows:

In the Specification

Please replace the paragraph at page 4, lines 5-9 with the attached Replacement Paragraph With Markings to Shown Changes Made. A clean version of the replacement paragraph is attached hereto.

In the Claims

Please cancel claim 25 and amend claim 1 as follows: